Request for Refund of Use Tax Paid on Services

Issued under authority of Public Act 148 of 2007.

Instructions: Use this form only to request a refund from the Michigan Department of Treasury for use tax paid on services. Do not use this form if you received or requested a refund from the service provider. A copy of the receipt itemizing the service charge and tax collected must accompany this request. Complete all fields on this form.

PART 1: Taxpayer Identification	n					
First Name	M.I. Last Name			Social Security Number		
Home Address (No., Street, P.O. Box or Rur	al Route)					
City or Town				State	ZIP Code	
PART 2: Service Provider Info	rmatio	n				
Name of Service Provider						
Address (No., Street, P.O. Box or Rural Rou	te)					
City or Town				State	ZIP Code	
PART 3: Service Details						
Date of Service Type of Serv			Type of Service			
Cost of Service Use Tax Paid						
Copy of Receipt Attached Yes. Copy of receipt is required.			est will not be processed.			
Have you requested or received a refund from Yes. This refund request will not be proc		vice Provider for use tax paid?				
PART 4: Certification						
I declare under penalty of perjury that the info	ormation in	n this return and attachments is	true and complete to the	best of my knowledge		
Signature				Da	ate	

For additional information, visit **www.michigan.gov/taxes**. You may also contact a Customer Service Representative at (517) 636-4730.

Mail a signed refund request with an attached copy of your receipt to:

Sales, Use and Withholding Taxes Michigan Department of Treasury P. O. Box 30781 Lansing, Michigan 48909